

MEDICAL CERTIFICATE
(For Employment)

INSTRUCTIONS

- a. This medical certificate should be accomplished by a licensed government physician.
- b. Attach this certificate to original appointment, transfer and reemployment.
- c. The results of the following pre-employment medical/physical/psychological must be attached to this form:


- ☒ Blood Test
- ☒ Urinalysis
- ☒ Chest X-Ray
- ☒ Drug Test
- ☐ Psychological Test
- ☐ Neuro-Psychiatric Examination (if applicable)

FOR THE PROPOSED APPOINTEE

NAME (Last Name, First Name, Name Extension (if any) and Middle Name) CAYUBIT, NIEL JR. TEVES			AGENCY / ADDRESS DTE (VSMHS)
ADDRESS HBUNAWAN, BAYBAY CITY			
AGE 28	SEX MALE	CIVIL STATUS MARRIED	PROPOSED POSITION INSTRUCTOR I

FOR THE LICENSED GOVERNMENT PHYSICIAN

I hereby certify that I have reviewed and evaluated the attached examination results, personally examined the above named individual and found him/her to be physically and medically ☒ FIT / ☐ UNFIT for employment.

SIGNATURE over PRINTED NAME OF LICENSED GOVERNMENT PHYSICIAN:  MERRY CHRIST L. Y. SUPNET-GUINOCY, M.D. Medical Officer III License No. 111828		OTHER INFORMATION ABOUT THE PROPOSED APPOINTEE	
AGENCY/Affiliation of Licensed Government Physician: You Hospital			
LICENSE NO. 111828	HEIGHT (M) Bare Foot 1.65	WEIGHT (KG) Stripped 66	BLOOD TYPE 404
OFFICIAL DESIGNATION medical officer ty		DATE EXAMINED 8-13-24	



(Neuro Psychiatric Test)
Ormoc City (053-832-3123)

08/09/2024

Date: _____

PURPOSE OF EXAMINATION: EMPLOYMENT
NAME: CAYUBIT, NIEL JR. TEVES Age: 28 SEX: M MARRIED
HOME ADDRESS: BAYBAY CITY LEYTE C.S.: _____
EDUCATIONAL ATTAINMENT: COLLEGE GRADUATE
PURPOSE/ DATE OF PREVIOUS NP EXAMINATION: _____

FACTORS	ABSENT	LOW	AVERAGE	HIGH
INTELLIGENCE				
1. Capacity for Abstraction			X	
2. Organizational Capacity			X	
3. Learning Activities			X	
4. Alertness			X	
MANNER OF COMMUNICATION PREFERRED				
1. Verbal			X	
2. Non-Verbal			X	
EMOTIONAL STABILITY				
1. Coping with Stress			X	
2. Control of Aggressive hostile impulse			X	
3. Free from neuro tendencies			X	
VALUES				
1. Positive			X	
2. Negative			X	
EDUCATION: Relevant Training			X	
EXPERIENCE: Security Training				
Handling Guns				
Others:				
MOTIVATION: Security Reasons				
Self-esteem / confidence			X	
Others:				
SOCIAL ADAPTABILITY:				
1. With people in general			X	
2. With peers			X	
3. With supervisor			X	
4. With subordinates			X	
WORK ATTITUDES:				
1. Responsibility			X	
2. Loyalty			X	
3. Perseverance			X	
4. Initiative			X	

REMARKS
Psychological: No gross psychological abnormality
Negative psychiatric disorder.

RECOMMENDATION
FOR FIREARMS LICENCE
____ Recommended for possession
____ Recommended permit to carry
____ Needs training on handling to carry
____ Not recommended

FOR SECURITY GUARDS/OTHERS
☒ Recommended with
____ Recommended risk
____ Needs training
____ Not recommended

LYN L. VERONA, MD
Psychiatrist / NP Screener
Accreditation / PRC No. 80515